

P12000019247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

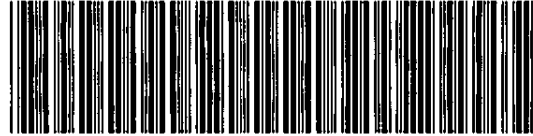
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: face look hair salon and beauty supply inc
(Name of Corporation)

DOCUMENT NUMBER: P12000019247

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ivett Pichardo

(Name of Person)

facelook salon & spa

(Name of Firm/Company)

508 e Osceola Pkwy

(Address)

Kissimmee, Florida, 34744

(City/State and Zip Code)

For further information concerning this matter, please call:

Ivett Pichardo

(Name of Person)

at (**407**) **690-1253**

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.



Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

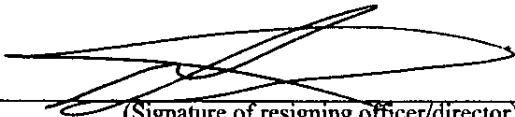
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Gabriel Mnayarji, hereby resign as VSTD
(Title)

of face look hair salon and beauty supply inc,
(Name of Corporation)

p12000019247, a corporation organized under the laws of the State of
(Document Number, if known)

florida.


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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